

Department of Energy

Carlsbad Field Office
P. O. Box 3090
Carlsbad, New Mexico 88221
June 16, 2004



Dr. Amrit S. Boparai Analytical Chemistry Laboratory Argonne National Laboratory-East 9700 South Cass Avenue Argonne, IL 60439-4837

Subject:

Issuance of Corrective Action Report 04-029 for Argonne National Laboratory-East Audit A-04-18

Education y East Addit A-04-1

Dear Dr. Boparai:

The Carlsbad Field Office (CBFO) performed Audit A-04-18 of Argonne National Laboratory-East (ANL-E), on June 8 and 9, 2003. The scope of this audit was the adequacy, implementation, and effectiveness of the quality assurance elements and technical elements related to the procedures and processes used by ANL-E in its role as the sample preparation contractor for the Headspace Gas Performance Demonstration Program. As a result of this audit, the subject Corrective Action Report (CAR) has been issued.

Please determine and document on the enclosed CAR continuation sheets your proposed Corrective Action Plans (CAPs) for CAR 04-029. Please forward the proposed CAPs and schedules for completion to me prior to the response due dates identified in CAR block 14.

If you have any questions or comments, please contact me at (505) 234-7442.

Sincerely,

M. Lea Chism

Quality Assurance Specialist

Enclosure

cc: w/enclosure

A. Holland, CBFO *ED

K. Watson, CBFO *ED

M. Brown, CBFO *ED

K. Joshi, DOE-CH *ED

A Gable, DOE-CH *ED

M. Eagle, EPA *ED

S. Zappe, NMED *ED

K. Dunbar, WTS *ED

C. Watkins, CTAC *ED

BJ Verret, CTAC *ED

A. Pangle, CTAC *ED

CBFO QA File

CBFO M&RC

*ED denotes electronic distribution CBFO:QA:MLC:GS:04-1533:UFC 2300.00



CORRECTIVE ACTION REPORT

1. CAR No: 04-029	2. Activity Report No:	A-04-18	3. Page <u>1</u> of <u>2</u> .	
4. Controlling Document: SOP ANL-107		5. CBFO Assessment Team Leader: M. Lea Chism		
6. Responsible Organization: ANL-E		7. CAQ Was Discus	sed With: E. Streets, A. Boparai	
8. Requirement that was violated:	•			
See Attached Continuation Sheet				
See Thursday Communion Sheet				
9. Condition Adverse to Quality:				
Logbooks/Notebooks are not being reviewed as required by procedure.				
The QA Coordinator has not review			C	
There is no objective evidence that notebook reviews conducted by the Group Leader are scheduled and that this schedule and completion of reviews are documented with the QA Coordinator.				
10. Suggested Actions (Optional): None				
11a. Significant CAQ (Yes or No): No 11b. Work Suspension Recommended (Yes or No): No				
11b. Work Suspension Recommended 11c. RCRA-Related	(Yes or No): No			
11d. Accelerated Corrective Action Requi				
12. Types of Actions: Remedial: X Investigative: X Root Cause: X Actions to Preclude Recurrence: X.				
13. CAR Initiator: BJ VERRET BY Sifful Date: 6-15-04.				
BJ Verret/C. Watkins				
14. Response Due Date: 07/19/04 Corrective Action Plan Required: YES NO				
Required Corrective Action Completion Date:				
15. a. Concurrence: M. Ala (h	ism 010-17-04	b. NA		
Assessment Team Leader	Date	Responsible Assi	istant Manager Date	
A LIA				
Quality Assurance M	Ianager Date			
16. Corrective Actions Proposed by the Responsible Organization: Use CAR Continuation Sheet				
17. Acceptance of Proposed Corrective Actions:				
Assessment Team Leader	Date			
18. Verification of Corrective Action Completion: (Use CAR Continuation Sheet)				
19a. Verified By:				
Name	regards, you are all the management of the second of the s	Date		
19b. Trend Cause Code:				
20. Closure:				
Quality Assurance N	1anager	Date		

CBFO CORRECTIVE ACTION REPORT

(continuation sheet)

1. CAR No: A	2. Activity No: A-04-18	3. Page 2 of 2

Block # 8. Requirement that was violated (continued)

- 2.3.2 Group Leaders shall schedule periodic reviews to ensure that requirements for recording analytical results and related information as stated in this procedure or Client documents are met.
- 2.3.3 Group Leaders or their designees shall be responsible for performing a review of their group's notebooks.
- 2.3.4 Reviewers shall inform the QA Coordinator of the scheduled review and, upon completion of the review, shall notify the Coordinator and identify all notebooks reviewed.
- 2.3.7 The QA Coordinator shall check at least 10% of reviewed notebooks to verify the review. The Coordinator may document this by use of the same stamp shown in Step 2.3.5, or simply add their signature/initials and dating the last page of the group of reviewed pages, next to the reviewer's stamp added in Step 2.3.5.

INSTRUCTIONS FOR PROVIDING CORRECTIVE ACTION RESPONSE

WASTE ISOLATION PILOT PLANT U.S. DEPARTMENT OF ENERGY Carlsbad Field Office

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INSTRUCTIONS FOR COMPLETING A CORRECTIVE ACTION RESPONSE TO A CAR ADDRESSING A CONDITION ADVERSE TO QUALITY

You are requested to provide a corrective action in response to this corrective action report (CAR) by the due date identified in block 14 of the CAR. If this date cannot be met, provide a written request for extension to the assessment team leader (block 5). This request must include justification for the delay and must be provided prior to the due date.

The response shall address the corrective actions indicated in block 12. As appropriate, develop the response in accordance with the following sequence and format:

In order to develop the CAR response, perform an investigative action to determine the extent and impact of the deficiency and to identify the root cause. Next, determine the actions required to correct the adverse condition. The response shall include the following information, as appropriate to block 12.

- 1. Corrective action response for CAR # 04-029
- A. **Remedial Action**-Describe actions required or taken to correct the specific conditions noted and any similar conditions identified during the investigations.
- B. **Extent and Impact of the Deficiency-**Describe the investigative actions performed to determine the extent and impact of the condition and the results. This will include a determination of the acceptability of any data generated prior to resolution of the deficiency.
- C. Root Cause Determination-Identify the root cause of the condition as determined through investigative action.
- D. Corrective Action to Preclude Recurrence-Identify the actions required to address the root cause of the condition in order to preclude recurrence.
- 2. For each action above, identify the individual assigned responsibility for completion of the action and the anticipated (or actual, if complete) completion date.
- 3. The response must identify the individual having the overall responsibility for completion of the corrective actions.